Preferrals
6/4/19

NEIGHBORHOOD AND COMMUNITY SERVICES STANDING COMMITTEE



MAYOR'S OFFICE COORDINATORS REPORT

OVERALL STATUS (please circle): APPROVED DENIED N/A CANCELED						
Petition #:	801	Eve	nt Name: Rock	et Mort	gage 5K	
	June 23, 2					
Street Clos	_{ure:} <u>Griswol</u> d	d Stre	et & Fort S	treet		
	n Name: Runr					
Street Addr	ess: <u>269 Wa</u>	Iker S	Street Suite	238 De	troit, MI 48	207
	e of the COMPL					
	Clerk's Departn or City Departmen			unication:		
	or the Coordinato					
Event Elem	ents (check all th	nat appl	y):			
✓ Walkath	on Ca	arnival/C	Circus	Concert	/Performance	√ Run/Marathon
Bike Ra	ce Re	eligious	Ceremony	 Political	Ceremony	Festival
Filming	Pa	arade		Sports/F	Recreation	Rally/Demonstration
Fireworl	ks Co	onventic	on/Conference	Other: _		
	r Liquor License	e	_			
	•					
		Pet	ition Communic	cations (inc	lude date/time)	
Rocket Mo	rtgage Classic	5K is a	n inaugural cele	ebration of	the PGA Tour	Stop. The route is located
on Michiga	an Avenue betw	een Gr	riswold and 18th	n Street fro	m 8:00am - 10	J:30am.
Dete		its and I	icense requireme	ents must b	e fulfilled for an	approval status ** ditional Comments
Date	Department	IN/A	APPROVED	DENILD	DPD Assisted	
	DPD	П	V		DED Assisted	LVent
					-	
	DED/					th DMCare Express to
	DFD/ EMS		V		Provide Prival	te EMS Services
					DPD Assisted	I Event; No Permit Required
	DPW		✓			
	Health Dept.	П	7		No P	ermits Required

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED		\checkmark		Type III Barricades & Road Closure Signage Required
,	Recreation	✓			No Jurisdiction
	Bldg & Safety		V		No Permits Required
	Bus. License	V			No Jurisdiction
	Mayor's Office		\checkmark		All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking		✓		Purchase of Parking Meters Required
	DDOT		✓		Low Impact on Buses
MAYOR'S	OFFICE Betha	nie	Justie		+

Date: May 29, 2019

City of Detroit OFFICE OF THE CITY CLERK

Janice M. Winfrey City Clerk Caven West
Deputy City Clerk/Chief of Staff

DEPARTMENTAL REFERENCE COMMUNICATION

Tuesday, April 09, 2019

To:

The Department or Commission Listed Below

From:

Janice M. Winfrey, Detroit City Clerk

The following petition is herewith referred to you for report and recommendation to the City Council.

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

MAYOR'S OFFICE DPW - CITY ENGINEERING DIVISION
POLICE DEPARTMENT FIRE DEPARTMENT
BUSINESS LICENSE CENTER BUILDINGS SAFETY ENGINEERING

RunningFlat USA Inc, request to hold "Rocket Mortgage Classic 5k" Campus Martius on June 23, 2019 from 8:00 am to 10:30 am. Street closures will include Michigan from Griswold to Rosa Parks and Rosa Parks from Michigan to Bagley.

City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the special events guidelines, please print them out for reference. You are required to complete the information below so that the City of Detroit can gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the City of Detroit Clerk's Office at least 60 days prior to the first day of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets or maps as needed.

	Section 1- GENERAL EVE	NT INFORMATION	
Event Name: Rocket Mortgage	Classic 5K		
Event Location: Near Campu	s Martius		
		N. I.C.A.NIE INFORMATION	
		PLICANT INFORMATION	
Organization Name:	ningFlat USA Inc.		
Organization Mailing Address: 26	9 Walker St, Suite 238		
Business Phone: 519-980-5440		Business Fax:	
Federal Tax ID # 32-0490311			
If registered as a	non-profit, indicate non-profit ID	number and attach a copy of the certifica	te.
Applicant Name: Chris Uszy	nski		
Race Director/ Pr			
Title/Role: chris@runni	ngflat.com		
Email Address:	St, Suite 238, Detroit MI 4820)7	
Mailing Address: 519-980-544			
Business Phone:	+0	Business Fax::	
Event On-Site Contact Person: Cl	nris Uszynski		
Mailing Address: 269 Walker St,	Suite 238, Detroit MI 48207		
Business Phone: 519-980-5440 Business Fax:			
T. / I am a make a cfracus	(a) authorized to make decisions f	or the organization/event (indicate role/re	sponsibility).
	Mortgage	or the organization event (material constitution)	
List Event Sponsors:	Not tgage		
Event Elements (check all that appl	у)		The state of the s
[x] Walkathon	[] Carnival/Circus	[] Concert/Performance	9
[x] Run/Marathon	[] Bike Race	[] Religious Ceremony	SPECIAL PARTY
[] Political Event	[] Festival	[] Filming	
[] Parade	[] Sports/Recreation	[] Rally/Demonstration	SEE 8 PE
[]Convention/Conference	[] Fireworks	[] Other:	0.1 0.1
			P~

on Michigan near Woodward and run	s to Rosa Parks Blvd and back.
What are the projected set-up, event	and tear down dates and times (must be completed)?
Begin Set-up Date & Time: 2:00 am	Complete Set-up Date & Time: 7:00 am
Event Start Date & Time: 8:00 am	Event End Date & Time: 10:30 am
Begin Tearing Down Date: 10:30 am	Complete Tear Down Date: 12:00 pm
Event Times (If more than one day, give time	nes for each day):
Is this the first time you have held thi	is event in the City of Detroit?
If no, what years has the event been held in	Detroit?
When was the event last held in Detroit?	
Where was the event last held in Detroit?	
What were the hours last year?	
Project Attendance This Year (Minimum –	Maximum)? 5,000 is the cap
What is the basis for your projected attendar	nce? RunningFlat produces runs from 5,000 to 20,000 participants, we have a track record
Detroit and we are capping the event at	5,000 participants
Please describe your anticipated/ targ	get audience: Runners/Walkers/PGA Fans from out of town
Is this going to be an annual event?	Yes No
If yes, do you have a preferred/proposed for	r next year?
If a parade is planned. Indicate elements (charge of the parade is planned. Indicate elements (charge) and the parade is planned. Indicate elements (charge) are parade in parade is planned. Indicate elements (charge) are parade in parade in parade is planned. Indicate elements (charge) are parade in parade in parade is planned. Indicate elements (charge) are parade in parad	neck all that apply):
[] Floats [] Animals	
[] Vehicles [] Other:	
[] Bands	
If animals included, specify type, number	r and how used.
Name of business supplying animal(s):	
Name of business supplying animal(s): Contact Person:	

Section 3- LOCATION/SITE INFORMATION

Location of Event: Griswold to Woodward on Mich	igan is the star	t/finish area		
Facilities to be used (circle): Street	Sidewalk	Park	City Facility	
Please attach a site plan which illustrates the anticipated la	ayout of your even	at including the following:		
-Public entrance and exit -Location of merchandising booths -Location of food booths -Location of garbage receptacles -Location of beverage booths -Location of sound stages -Location of hand washing sinks -Location of portable restrooms	-1 -F -1 -3 -1 -1	Location of First Aid Location of fire lane Proposed route for walk/run Location of tents and canopies Sketch of street closure Location of bleachers Location of press area Sketch of proposed light pole banners		
Section	on 4- ENTER	RTAINMENT		
What type of entertainment will be used? (check all that a	apply)			
[] Singers [] Magician				
[X]Musicians [] Story Tell	ng			
[] Comedians [] Other: _				
List proposed entertainers and/or bands performing at the event: TBA Will a sound system be used? Yes No				
If yes, what type of sound system?	800W self pow	ered speakers in the start chute		
[] Acoustic-audible, sound heard within natural range				
X] Amplified-augmented, sound increased to broaden range The amplified sound will be used: To start and finish	n the race			
Will the event consist of a musical concert? Yes	☑ No			
If yes, what type of music? (check all that apply)				
[] Live [] Recorded [] Karaoke/Lip-sy	rnch		
Describe specific power needs for entertainment and/or music:				
How many generators will be used? 2 Honda eu	2000i			
How will the generators be fueled?	Gas but non	e onsite all on board the genera	tor	
Name of vendor providing generators: RunningFla	nt owned			
Contact Person:				

Address:	Phone:
City/State/Zip:	
	n 5- COMMUNICATION/ADVERTISING STRATEGY
Check all applicable boxes that desc	ribe the type of promotion you plan to use to attract participants:
[] Radio (Specify stations):	
[] Television (Specific stations):	
[] Newspapers (specify papers):	
[] Web site (identify web address)	:
[] Public Relations or Marketing F	Firm (Specify):
Contact Info: [] Raffle (List Item(s)):	
[] Billboards	
[] Flyers	
[] Street Banners	
[] Other (specify):	
NOTE: All raffles subject to laws	of State/City.
	Section 6- SALES INFORMATION
Will there be advanced ticket sales? If yes, please describe:	
Will there be on-site ticket sales? If yes, list price(s):	☐ Yes ☑ No
Will food be sold? If yes, please pick up Special Events	Yes No s Vendor Packet in Suite 105:
Will merchandise be sold? If yes, describe:	☐ Yes ☑ No
Will a percentage of the proceeds be	e distributed to a charitable organization?
If yes, describe: Rocket Mortga	ge Charities
If the event is a fundraiser, identify	charity or recipient of funds: Rocket Mortgage Registered Charities
Will there be vending or sales? If yes, check all that apply:	☐ Yes ☑ No
[] Food	[] Merchandise
[] Non-Alcoholic Beverages	[] Alcoholic Beverages
[] Other (annai fir)	
Indicate type of items to be sold:	

Vill these be exclusive vendors	or outside vendors? (please describe):	
	- 731	
Se	ction 7- PUBLIC SAFETY & PARKING	G INFORMATION
Name of Private Security Com	pany: Existing park contract security will be used.	
Contact Person:	N/A	
Address:		Phone:
City/State/Zip:		
Number of Private Security Pe	rsonnel Hired Per Shift:	
Are the private security person	nel (check all that apply):	
[] Licensed	[] Armed	[] Bonded
Describe the emergency evacu		
	ecommodate anticipated attendance: Local Sunday mo	orning downtown parking lots
	of parking options? Give them maps of parking in De	
•	ng rate?	
	Section 8- COMMUNITY IMPACT IN	NFORMATION
How will your event impact th		
pedestrian traffic, sound carryo	Not much going on in	Downtown Detroit on a Sunday morning
Have local neighborhood grou	ps/businesses approved your event?	☐ Yes ☐ No
Indicate what steps you have o	r will take to notify them of your event: Sending flyers	to all apartments and businesses on the cour
Indicate contact names and pho	one numbers (for verification) or attach approved letter(s)):
	Section 9- EVENT SET-U	P
Complete the appropriate cates Structure	cories that apply to the event.	
How Many?	none	
Size/Height		
Booth	none	
Tent (enclosed on 3 sides)	none	

Canopy (open on all sides)	none	
Staging/Scaffolding	none	
Bleachers	none	·
Company:		
Grill [] Gas [] Charcoal	[] Electrical	[] Propane
Fireworks (Pyrotechnics) [] Aerial [] Stage		
Provide Sketch:		
Portable Restrooms: Parkway [34] Standard [6] ADA Ad	ccessible	
Vehicles		
Type/Weight:	14	
Other:	<u></u>	
NOTE: Specific requirements mus	t be met and special approval must b	pe received by the Detroit Fire Department.
Will additional electrical wiring ne	eed to be installed? Specify location	s, voltage, amperage, and phase.
Will additional utility services be u	used (power, water, etc.)? Please des	scribe.
Do you plan a fireworks display?	List dates, time, location, vendor, an	d attach certificate of insurance.

	Section 10- COMPLETE ALL THAT APPLY
Name of Sanitation	on Company collecting refuse and garbage?
Contact Person:	RunningFlat USA Inc
Address:	Phone:
City/State/Zip	
Name of company	y providing emergency medical services? DMC
Contact Person:	
Address:	
City/State/Zip:	
Name of company	y providing porta-johns. PARKWAY
Contact Person:	
Address:	Phone:
City/State/Zip:	
	catering company? N/A
Contact Person:	
Address:	Phone:
City/State/Zip:	
SPECIAL USE R	PEOLIESTS
SPECIAL USE R	EQUES 13
	possible streets you are requesting to be closed. Include the day, date, and time of requested closing and reopening. natures must be submitted with application for approval.
Neighborhood Sig	natures must be submitted with appreation for approvar.
Attach a man ar	sketch of the proposed area for closure.
î	
STREET NAME	Woodward
FROM TO	Griswold
	June 23rd
Closure Dates: Beg. Time:	2:00am
End Time:	12:00 pm
Reopen Date: Time:	June 23rd
i iiie:	noon

70.01	E: Michigan Avenue
FROM	Griswold
ГО	Rosa Parks Blvd
Closure Dates:	June 23rd
Beg. Time:	7:30 am
and Time:	10:30 am sooner with last participant rolling open
eopen Date:	June 23rd
ime:	10:30 am
TREET NAM	E: Rosa Parks Blvd
ROM	Michigan Ave
O	Bagley Avenue
U D-4	June 23rd
losure Dates: leg. Time:	
nd Time:	7:30 am 10:30 am sooner with last participant rolling open
leopen Date:	June 23rd
ime:	10:30 AM
TREET NAMI	E:
ROM	
O	
losure Dates:	<u>□</u>
eg. Time:	
nd Time: .eopen Date:	
ime:	
equested City 1	Equipment
	Equipment (year)
rovided In:	(year)
rovided In: urrent Request:	(year)
rovided In: urrent Request:	(year)
rovided In: urrent Request: treet Closures:	(year)
rovided In: urrent Request: treet Closures:	(year) (year) arking signs [] Light pole
rovided In: Current Request: treet Closures:] Posting no pa	(year) (year) arking signs [] Light pole
rovided In: urrent Request: treet Closures:] Posting no pa] Electrical Ser arricades are n	(year) arking signs [] Light pole rvices [] Storage for Trailers/Trunks not available from the City of Detroit.
	(year) (year) arking signs [] Light pole rvices [] Storage for Trailers/Trunks
Provided In: Current Request: treet Closures:] Posting no pa] Electrical Ser Carricades are n	(year) arking signs [] Light pole rvices [] Storage for Trailers/Trunks not available from the City of Detroit.
rovided In: current Request: treet Closures:] Posting no pa] Electrical Ser arricades are n DDITIONAL 1 there any addit	(year) arking signs [] Light pole rvices [] Storage for Trailers/Trunks not available from the City of Detroit.
rovided In: current Request: treet Closures:] Posting no pa] Electrical Ser arricades are n DDITIONAL 1 there any addit	(year) arking signs [] Light pole rvices [] Storage for Trailers/Trunks not available from the City of Detroit. INFORMATION cional information that you feel is important to mention regarding your event or additional requests?
rovided In: urrent Request: treet Closures:] Posting no pa] Electrical Ser arricades are n DDITIONAL I there any addit	(year) arking signs [] Light pole rvices [] Storage for Trailers/Trunks not available from the City of Detroit. INFORMATION ional information that you feel is important to mention regarding your event or additional requests? urse that we will set up the Start and Finish in the middle of the morning, start at 8am and have almost everyone in by 10am with all roads of

AUTHORIZATION & AFFADAVIT OF APPLICANT

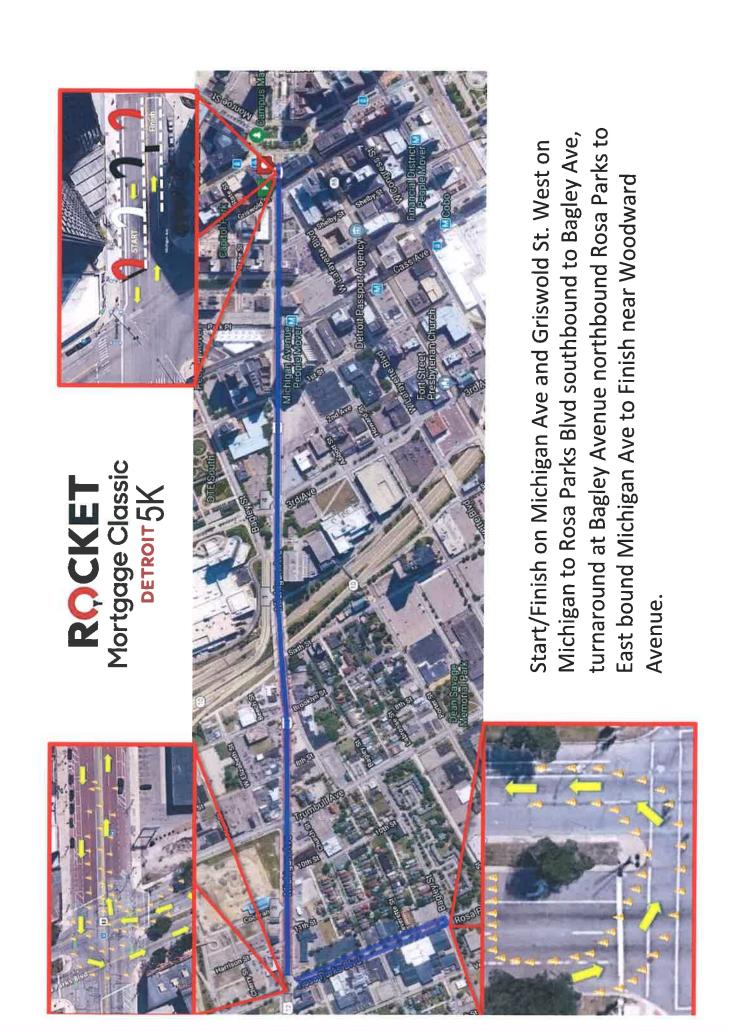
I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understand and agree to abide by the rules and regulations governing the proposed Special Event, and I understand that this application is made subject to the rules and regulation established by the Mayor or the Mayor's designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to Special Events. I further agree to abide by these rules, and further certify that I, on behalf of the Event agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event, to the City of Detroit.

Signature of Applicant

March 30th 2019

Date

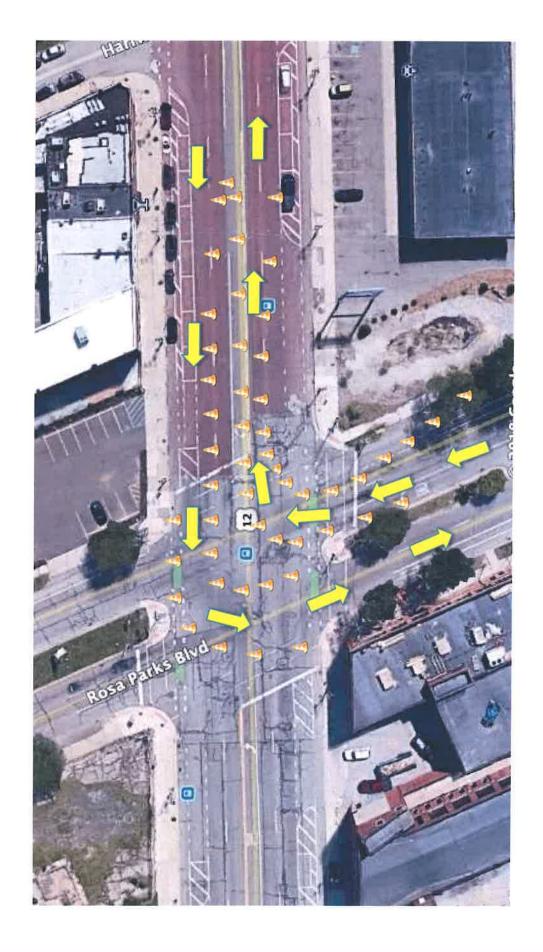
NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.



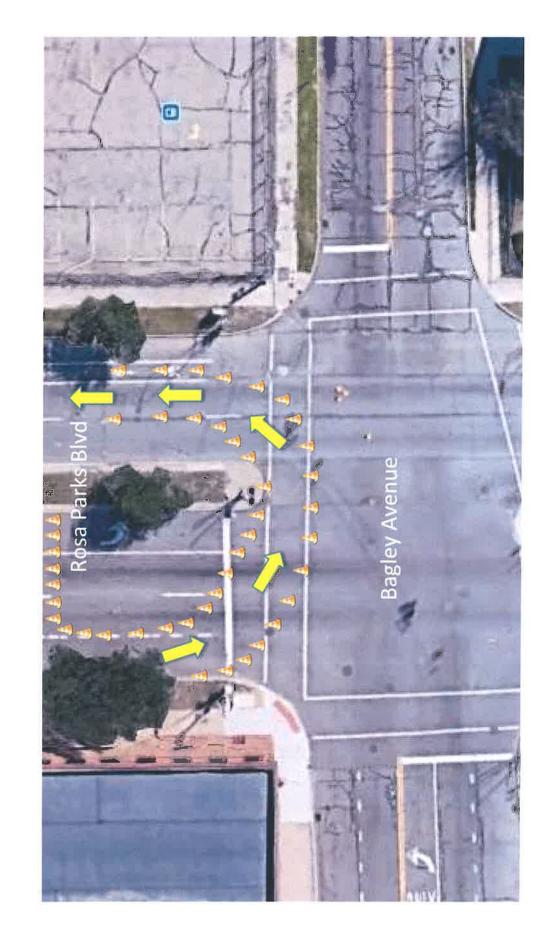
Start/Finish



Turn Michigan Ave/Rosa Parks Blvd



Turn Around Rosa Parks Blvd at Bagley Ave



Petition of RunningFlat USA Inc, request to hold "Rocket Mortgage Classic 5k" Campus Martius on June 23, 2019 from 8:00 am to 10:30 am. Street closures will include Michigan from Griswold to Rosa Parks and Rosa Parks from Michigan to Bagley.

REFERRED TO THE FOLLOWING DEPARTMENT(S)

MAYOR'S OFFICE DPW - CITY ENGINEERING DIVISION
POLICE DEPARTMENT FIRE DEPARTMENT
BUSINESS LICENSE CENTER BUILDINGS SAFETY
ENGINEERING



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OVERALI	L STATUS (ple	ease ci	rcle): <mark>✓</mark> <u>API</u>	PROVED	DENIED N/A CANCELE
Petition #: _	904	Eve	nt Name: Detr	oit Athle	etic Club Classic Car Show
Event Date	June 14, 2	2019			
	_{ure:} Adams :		t		
	_{n Name:} Detro				
•			Avenue De	etroit, M	11 48226
			Special Events A		
			Reference Comm	nunication:	
	r City Department or the Coordinato				
	ents (check all th				, Vi
			-	7	t/Dayfayyaayaa
Walkath		arnival/0	-		t/Performance Run/Marathon
Bike Rad	ce	eligious	Ceremony	Politica	l Ceremony Festival
Filming	Pa	arade			Recreation Rally/Demonstration
Firework	cs Co	onventio	on/Conference	✓ Other: _	Classic Car Show
24-Hour	Liquor License	е			
		Pet	ition Communic	cations (inc	clude date/time)
	letic Club will he ween John R. a			r Show fro	om 8:00am - 3:00pm with street closure on
Adams bet	Ween John K. a	and bit	1511.		
	76 9 6	g .	. v		
Date	** <u>ALL</u> <u>perm</u> Department	its and I	APPROVED	DENIED	be fulfilled for an approval status ** Additional Comments
	•	-			Contracted with DAC Security to Provide
	DPD		✓		Private Security Services
					No Demoite Demoined
	DFD/		\checkmark		No Permits Required
	EMS				
	DPW				ROW Permit Required
	DCAA		▼		
	Health Dept.				

Date	Department	N/A	APPROVED	DENIED	Additional Comments
	TED		✓		Type III Barricades & Road Closure Signage Required
	Recreation	✓			No Jurisdiction
	Bldg & Safety				No Permits Required
	Bus. License		✓		No Permits Required
	Mayor's Office		✓		All Necessary permits must be obtained prior to event. If permits are not obtained, departments can enforce closure of event.
	Municipal Parking	✓	✓		No Parking Signs Required
	DDOT		\checkmark		No Impact on Buses
					<u>, </u>
MAYOR'S OFFICE					
Signature: Bethanie Lusher					
Signature: Bethanie Lusher Date: May 29, 2019			- 3		

City of Detroit

Janice M. Winfrey
City Clerk

OFFICE OF THE CITY CLERK

Caven West
Deputy City Clerk/Chief of Staff

DEPARTMENTAL REFERENCE COMMUNICATION

Monday, June 3, 2019

To:

The Department or Commission Listed Below

From:

Janice M. Winfrey, Detroit City Clerk

The following petition is herewith referred to you for report and recommendation to the City Council.

In accordance with that body's directive, kindly return the same with your report in duplicate within four (4) weeks.

MAYOR'S OFFICE POLICE DEPARTMENT
FIRE DEPARTMENT PLANNING AND DEVELOPMENT DEPARTMENT
DPW - CITY ENGINEERING DIVISION TRANSPORTATION DEPARTMENT
MUNICIPAL PARKING DEPARTMENT BUSINESS LICENSE CENTER

RunningFlat USA Inc., request to hold "Rocket Mortgage Classic 5k" near Campus Martius on June 23, 2019 from 8:00 AM to 10:30 AM with the temporary closure of Fort St. from Woodward to Griswold and from Griswold to St. Anne and back.

City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. The City of Detroit will be strictly adhering to the special events guidelines, please print them out for reference. You are required to complete the information below so that the City of Detroit can gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the City of Detroit Clerk's Office at least 60 days prior to the first day of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets or maps as needed.

	Section 1- GENERAL EVI	ENT INFORMATION	
Event Name: Rocket Mortgage C	lassic 5K		
Event Location: Near Campu	s Martius		
		PLICANT INFORMATION	
Organization Name:	ingFlat USA Inc.		
Organization Mailing Address: 269	Walker St, Suite 238		
Business Phone: 519-980-5440		Business Fax:	
Federal Tax ID # 32-0490311			
If registered as a	non-profit, indicate non-profit IL	number and attach a copy of the certificate,	
Applicant Name: Chris Uszyr	nski		
Title/Role: Race Director/ Pre			
Email Address: chris@runnir	ngflat.com		
	St, Suite 238, Detroit MI 482	07	
Business Phone: 519-980-544	0 /4."	Business Fax:	
-	rio Horumaki	Zubiliob (uni)	
Event On-Site Contact Person: Ch	•		
Mailing Address: 269 Walker St, S	Suite 238, Detroit MI 48207		
Business Phone: 519-980-5440		Business Fax:	
List name/phone number of person((s) authorized to make decisions f	for the organization/event (indicate role/responsibility).	
List Event Sponsors: Rocket	Mortgage		
Event Elements (check all that apply)			
[x] Walkathon	[] Walkathon [] Carnival/Circus [] Concert/Performance		
[x] Run/Marathon	[] Bike Race	[] Religious Ceremony	
[] Political Event	[] Festival	[] Filming	
[] Parade	[] Sports/Recreation	[] Rally/Demonstration	
[]Convention/Conference	[] Fireworks	orks [] Other:	

Provide a brief description of your eve		the Rocket N	lortgage (Classic 5K in Downtown Detroit. Starts
on Fort St. near Woodward and runs v				i i
eastbound on Fort St in the Southern	lanes to near Wo	oodard Ave to	the FINIS	н
What are the projected set-up, event a June 23rd, 2019 Begin Set-up Date & Time: 2:00 am	nd tear down dat			ompleted)?
Event Start Date & Time: 8:00 am	Event End Date	& Time:	10:30 am	All of Fort St and course reopened except Fort St East of Griswold
Begin Tearing Down Date: 10:30 am	Complete Tear I	Down Date:	12:00 pm	Open all of Fort St
Event Times (If more than one day, give time	s for each day):			
Is this the first time you have held this	event in the City	of Detroit?	☑ Yes	□ No
If no, what years has the event been held in D	etroit?			
When was the event last held in Detroit?	-			
Where was the event last held in Detroit?	:			
What were the hours last year?				
Project Attendance This Year (Minimum – M	laximum)?5	5,000 is the ca	р	
What is the basis for your projected attendance	e? RunningFlat p	roduces runs	from 5,000	to 20,000 participants, we have a track reco
Detroit and we are capping the event at 5,	000 participants			
Please describe your anticipated/ targe	et audience: Run	ners/Walkers/	PGA Fans	s from out of town
_	Yes 🔽 No			=
If yes, do you have a preferred/proposed for r	next year?			
If a parade is planned. Indicate elements (che [] People [] Balloons	ck all that apply):			
[] Floats [] Animals				
[] Vehicles [] Other:				_
[] Bands				
If animals included, specify type, number a	and how used.			
Name of business supplying animal(s):				
Contact Person:				
Address:			Ph	none:
City/State/Zip				
F. (1)				

Section 3- LOCATION/SITE INFORMATION Location of Event: Griswold to Woodward on Michigan is the start/finish area City Facility Facilities to be used (circle): (Street) Sidewalk Park Please attach a site plan which illustrates the anticipated layout of your event including the following: -Location of First Aid -Public entrance and exit -Location of fire lane -Location of merchandising booths -Proposed route for walk/run -Location of food booths -Location of tents and canopies -Location of garbage receptacles -Sketch of street closure -Location of beverage booths -Location of bleachers -Location of sound stages -Location of press area -Location of hand washing sinks -Location of portable restrooms -Sketch of proposed light pole banners **Section 4- ENTERTAINMENT** What type of entertainment will be used? (check all that apply) [] Singers [] Magician [] Story Telling [X]Musicians [] Comedians Other: ____ Describe the entertainment for this year's event: Acoustic singers in the course for entertainment **TBA** List proposed entertainers and/or bands performing at the event: □ No ✓ Yes Will a sound system be used? 800W self powered speakers in the start chute If yes, what type of sound system? [] Acoustic-audible, sound heard within natural range [x] Amplified-augmented, sound increased to broaden range The amplified sound will be used: To start and finish the race Z No If yes, what type of music? (check all that apply) [] Recorded [] Karaoke/Lip-synch [] Live Describe specific power needs for entertainment and/or music: 2 Honda eu2000i How many generators will be used? Gas but none onsite all on board the generator How will the generators be fueled?

Name of vendor providing generators: RunningFlat owned

Contact Person:

Section 5- COMMUNICATION/ADVERTISING STRATEGY Check all applicable boxes that describe the type of promotion you plan to use to attract participants: [] Radio (Specify stations): [] Television (Specific stations): [] Newspapers (specify papers): [] Web site (identify web address): [] Public Relations or Marketing Firm (Specify): Contact Info: [] Raffle (List Item(s)): [] Billboards [] Flyers [] Street Banners [] Other (specify): NOTE: All raffles subject to laws of State/City. Section 6- SALES INFORMATION Will there be advanced ticket sales?
Check all applicable boxes that describe the type of promotion you plan to use to attract participants; [] Radio (Specify stations): [] Television (Specific stations): [] Newspapers (specify papers): [] Web site (identify web address): [] Public Relations or Marketing Firm (Specify): Contact Info; [] Raffle (List Item(s)): [] Billboards [] Flyers [] Street Banners [] Other (specify): NOTE: All raffles subject to laws of State/City. Section 6- SALES INFORMATION Will there be advanced ticket sales?
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Section 6- SALES INFORMATION Will there be advanced ticket sales?
Will there be advanced ticket sales?
If yes, please describe:
Will there be on-site ticket sales?
Will food be sold?
Will merchandise be sold?
Will a percentage of the proceeds be distributed to a charitable organization?
If yes, describe: Rocket Giving Fund
If the event is a fundraiser, identify charity or recipient of funds: Rocket Giving Fund
Will there be vending or sales?
[] Food [] Merchandise
[] Non-Alcoholic Beverages [] Alcoholic Beverages
[] Other (maniful)
Indicate type of items to be sold:

Vill these be exclusive vendors	or outside vendors? (please describe):	
Se	ction 7- PUBLIC SAFETY & PARKING INFO	ORMATION
Name of Private Security Com	pany: Existing park contract security will be used.	
Contact Person:	N/A	
Address:	Phone:	
City/State/Zip:		
Number of Private Security Po	rsonnel Hired Per Shift:	
Are the private security persor	nel (check all that apply):	
[] Licensed	[] Armed	[] Bonded
Describe the emergency evacu	ation plan: Plan published with DPD	
Describe the parking plan to a	ecommodate anticipated attendance: Local Sunday morning d	lowntown parking lots
How will you advise attendees	of parking options? Give them maps of parking in Downtown	n Detroit
Are you seeking a group parki	ng rate?	
II.	Section 8- COMMUNITY IMPACT INFORM	MATION
How will your event impact the pedestrian traffic, sound carryo	over safety)?	own Detroit on a Sunday morning
Have local neighborhood grou	ps/businesses approved your event?	s 🗆 No
Indicate what steps you have o	r will take to notify them of your event: Sending flyers to all ap	partments and businesses on the cours
	<u> </u>	
Indicate contact names and ph	one numbers (for verification) or attach approved letter(s):	
	(-).	
-		
	Section 9- EVENT SET-UP	
Complete the appropriate cates Structure	gories that apply to the event.	
How Many?	none	
Size/Height		
Booth	none	
Tent (enclosed on 3 sides)	none	

Canopy (open on all sides)	none	
Staging/Scaffolding	none	
Bleachers	none	
Company:		
Grill [] Gas [] Charcoal	[] Electrical	[] Propane
Fireworks (Pyrotechnics) [] Aerial [] Stage		
Provide Sketch:		
Portable Restrooms: Parkway [34] Standard [6] ADA Ad	ccessible	
Vehicles		
Type/Weight:	÷	
Other:		
NOTE: Specific requirements mus	st be met and special approval must	pe received by the Detroit Fire Department.
Will additional electrical wiring no	eed to be installed? Specify location	s, voltage, amperage, and phase.
2		
Will additional utility services be N/A	used (power, water, etc.)? Please de	scribe.
8		
Do you plan a fireworks display?	List dates, time, location, vendor, ar	nd attach certificate of insurance.
<u></u>		

ngFlat USA Inc
Phone:
g emergency medical services? DMC
g porta-johns. PARKWAY
Phone:
ompany? N/A
Phone:
S
reets you are requesting to be closed. Include the day, date, and time of requested closing and reopening. ast be submitted with application for approval.
he proposed area for closure.
reet
ard
rd
1

STREET NAME:	Fort Street	
FROM	Griswold	
ТО	St Anne St. and back	
Closure Dates: Beg. Time:	June 23rd 7:30 am	
End Time:	10:30 am sooner with last participant	rolling open
Reopen Date:	June 23rd	
Time:	10:30 am	
STREET NAME:		
FROM		
TO		
Closure Dates:	0	
Beg. Time:	**************************************	<u>=</u>
End Time: Reopen Date:	-	
Time:		
STREET NAME:		
FROM		
TO	(
Closure Dates:	7	
Beg. Time: End Time:		
Reopen Date:		
Time:	7	
Requested City Ed	quipment	
Provided In:	(year)	
Current Request:	(year)	
Street Closures:		
[] Posting no park	king signs	[] Light pole
[] Electrical Serv		[] Storage for Trailers/Trunks
Barricades are no	t available from the City of Detr	OIT.
ADDITIONAL IN	FORMATION	
Is there any addition	nal information that you feel is im	nportant to mention regarding your event or additional requests?
Simple course that we	will set up the Start and Finish in the mid	idle of the morning, start at 8am and have almost everyone in by 10am with all roads open
Immediately with the st	art/finish remaining closed until we pack	rup.
-		
-		

AUTHORIZATION & AFFADAVIT OF APPLICANT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understand and agree to abide by the rules and regulations governing the proposed Special Event, and I understand that this application is made subject to the rules and regulation established by the Mayor or the Mayor's designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to Special Events. I further agree to abide by these rules, and further certify that I, on behalf of the Event agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event, to the City of Detroit.

Signature of Applicant

March 30th 2019

Date

NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.

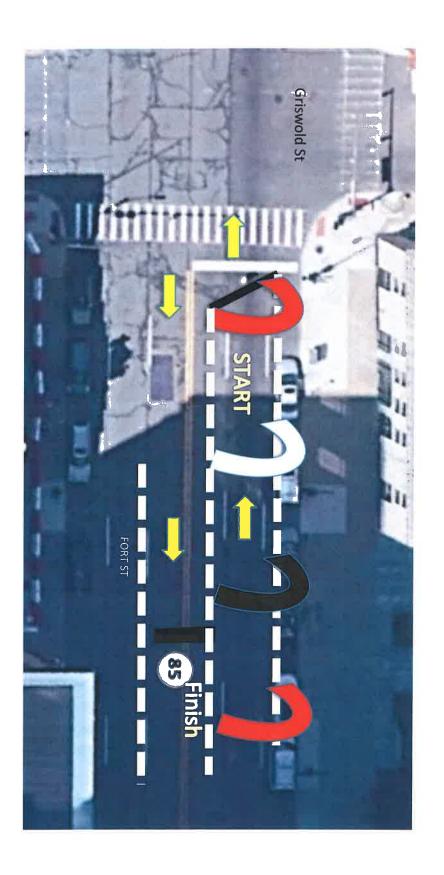


Start/Finish on Fort St and Griswold St.

Eastbound in the southern lanes of Fort St to the Finish. Start Westbound on Fort St. to the turn around just before St Anne St and return

entrance. We are open to leaving some of the seven lanes of traffic open for egress and

Start/Finish



Turn Around – Fort St after 18th St.



706

Petition of RunningFlat USA Inc., request to hold "Rocket Mortgage Classic 5k" near Campus Martius on June 23, 2019 from 8:00 AM to 10:30 AM with the temporary closure of Fort St. from Woodward to Griswold and from Griswold to St. Anne and back.

REFERRED TO THE FOLLOWING DEPARTMENT(S)

MAYOR'S OFFICE POLICE DEPARTMENT
FIRE DEPARTMENT DEPARTMENT
DPW - CITY ENGINEERING DIVISION
TRANSPORTATION DEPARTMENT
MUNICIPAL PARKING DEPARTMENT



May 31, 2019

HONORABLE CITY COUNCIL:

The Purchasing Division of the Finance Department recommends a Contract with the following firm(s) or person(s):

6001444

100% City Funding – AMEND 1– To Provide General Contractor Services for GSD at DPD 11th Precinct. (Building Repair, Renovation and Improvement Projects) – Contractor: Cross Renovations – Location: 34133 Schoolcraft Rd., Livonia, MI 48152 – Contract Period: Upon City Council Approval through May 28, 2020 – Total Contract Amount: \$1,652,600.00. GENERAL SERVICES (This Amendment is for Time Only, Original Expiration 5/29/19.)

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer Office of Contracting and Procurement

\mathbf{BY}	COUNCIL	PRESIDENT P	RO T	EM	SHEFFIELD

RESOLVED, that Contract No. 6001444 referred to in the foregoing communication dated May 31, 2019, be hereby and is approved.



May 31, 2019

HONORABLE CITY COUNCIL:

The Purchasing Division of the Finance Department recommends a Contract with the following firm(s) or person(s):

6001472

100% City Funding – AMEND 1– To Provide Capital Repairs at DPD 6th Precinct. (Mechanical/HVAC System Work, Electrical System Work, Plumbing Work, Structural Work, and Fire & Emergency Systems Work) – Contractor: Cross Renovations – Location: 34133 Schoolcraft Rd., Livonia, MI 48152 – Contract Period: Upon City Council Approval through May 28, 2020 – Total Contract Amount: \$1,168,900.00. GENERAL SERVICES (This Amendment is for Time Only, Original Expiration 5/29/19.)

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer Office of Contracting and Procurement

BY COUNCIL PRESIDENT PR	O TEM	SHEFFIELD
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RESOLVED, that Contract No. 6001472 referred to in the foregoing communication dated May 31, 2019, be hereby and is approved.



May 31, 2019

HONORABLE CITY COUNCIL:

The Purchasing Division of the Finance Department recommends a Contract with the following firm(s) or person(s):

6002146

100% City Funding – To Provide Mowing, Trash and Brush Clean up on Public Property known as the State Fairgrounds, and the Surrounding Areas on behalf of GSD. – Contractor: Premier Group Associates – Location: 535 Griswold, Ste. 1420, Detroit, MI 48226 – Contract Period: Upon City Council Approval through June 3, 2020 – Total Contract Amount: \$400,000.00. GENERAL SERVICES

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer Office of Contracting and Procurement

BY COUNCIL	L PRESIDENT	PRO	TEM	SHEFFIELD

RESOLVED, that Contract No. 6002146 referred to in the foregoing communication dated May 31, 2019, be hereby and is approved.



May 31, 2019

HONORABLE CITY COUNCIL:

The Purchasing Division of the Finance Department recommends a Contract with the following firm(s) or person(s):

6002148

100% City Funding – To Provide Mowing, Trash and Brush Clean up on Public Property known as the State Fairgrounds, and the Surrounding Areas on behalf of GSD. – Contractor: Detroit Grounds Crew – Location: 17217 Wyoming, Detroit, MI 48221 – Contract Period: Upon City Council Approval through June 3, 2020 – Total Contract Amount: \$400,000.00. GENERAL SERVICES

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer Office of Contracting and Procurement

BY COUNCIL PRESIDENT PRO TEM _____SHEFFIELD

RESOLVED, that Contract No. 6002148 referred to in the foregoing communication dated May 31, 2019, be hereby and is approved.



May 31, 2019

HONORABLE CITY COUNCIL:

The Purchasing Division of the Finance Department recommends a Contract with the following firm(s) or person(s):

6002166

Revenue – To Provide Debris and Rubbish Removal and Painting on Various Projects for GSD. – Contractor: Groundswell Design Group Inc. – Location: 1639 N. Hancock St., #101, Philadelphia, PA 19122 – Contract Period: Upon City Council Approval through June 30, 2019 – Total Contract Amount: Revenue. **GENERAL SERVICES**

Respectfully submitted,

Boysie Jackson, Chief Procurement Officer Office of Contracting and Procurement

BY COUNCIL PRESIDENT PRO TEM _____SHEFFIELD

RESOLVED, that Contract No. 6002166 referred to in the foregoing communication dated May 31, 2019, be hereby and is approved.





COLEMAN A. YOUNG MUNICIPAL CENTER 2 WOODWARD AVENUE, SUITE 1026 DETROIT, MICHIGAN 48226

PHONE: 313 • 628-2158 FAX: 313 • 224 • 0542 WWW.DETROITMI.GOV

May 20, 2019

The Honorable Detroit City Council
ATTN: City Clerk Office
200 Coleman A. Young Municipal Center
Detroit MI 48226

RE: Authorization to submit a grant application to the Community Foundation for Southeastern Michigan for the FY 2019 Park Improvements Grant

The General Services Department is hereby requesting authorization from Detroit City Council to submit a grant application to the Community Foundation for Southeastern Michigan for the FY 2019 Park Improvements Grant. The amount being sought is \$240,000.00. There is no match requirement. The total project cost is \$240,000.00.

The FY 2019 Park Improvements Grant will enable the department to:

- Support improvements to Pingree Park's recreational amenities
- Increase use of the park for recreational activities

We respectfully request your approval to submit the grant application by adopting the attached resolution.

Sincerely,

Ryan Friedrichs

Director, Office of Development and Grants

CC:

Katerli Bounds, Deputy Director, Grants Sajjiah Parker, Assistant Director, Grants

SITY OLERK 2519 MRY 30 amer44



RESOLUTION

Council Member

WHEREAS, the General Services Department has requested authorization from City Council to submit a grant application to the Community Foundation for Southeastern Michigan, for the FY 2019 Parks Improvements Grant, in the amount of \$240,000.00, to support improvements to Pingree Park's recreational amenities; and

WHEREAS, there is no match requirement; now

THEREFORE BE IT RESOLVED, the General Services Department is hereby authorized to submit a grant application to the Community Foundation for Southeastern Michigan for the FY 2019 Park Improvements Grant.



COLEMAN A. YOUNG MUNICIPAL CENTER 2 WOODWARD AVENUE, SUITE 1026 DETROIT, MICHIGAN 48226 PHONE: 313 = 628-2158

FAX: 313 • 224 • 0542 WWW.DETROITMI.GOV

Grant Application Request Form (GARF)

In order to secure the Office of Development and Grants (ODG) approval required under Section 18-4-2 of the Detroit City Charter, this form is to be filled out by City Departments as soon as possible upon learning of an opportunity that the Department would like to pursue. This form must be signed and submitted not later than 20 business days prior to the application deadline.

Please submit this form to the following ODG staff: Sajjiah Parker, Assistant Director, parkersa@detroitmi.gov and Greg Andrews, Program Analyst IV, andrewsgr@detroitmi.gov

City Department	General Services
Date	5-14-2019
Department Contact Name	Juliana Fulion
Department Contact Phone	313-628-2365
Department Contact Email	fulton)@detroitmi.gov
Grant Opportunity Title	Park Improvements
Grant Opportunity Funding Agency	Community Foundation for Southeast Michigan
Web Link to Opportunity Information	www.cfsem.org
Award Amount (that Department will apply for)	\$240,000
Application Due Date	5/20/19
Anticipated Proposed Budget Amount	\$240,000
City Match Contribution Amount	N/A
Source of City Match (include Appropriation Number, Cost Center, and Object Code)	N/A
List of programs/services/activities to be funded and the Budget for each Sample: - ABC Afterschool program: \$150,000 - XYZ Youth leadership program: \$100,000 - Salary/Benefits: \$95,000 - Supplies: \$5,000	Funds will be used to support improvements to Pingree Park's recreational amenities on Detroit's eastside
Brief Statement of Priorities/Purpose for the Application Somple: To support expansion of promising youth development programs in MNO neighborhood.	To create recreational activities close to home for Detroit residents
Key Performance Indicators to be Used to Measure the Programs/Services/Activities Sample: # of kids newly enrolled in ABC and XYZ % of kids from ABC who demonstrate improved educational performance	Adherence to project timeline Increased use of the park for casual and organized sports and other recreation

Janet Anderson
Director's Name (Please Print)

)anct Underson (birector's Signature 5-15-19

Date